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Par. 4. A first-cabin passenger, bearing the certificate of an officer of the Public Health and Marine-Hospital Service, certifying to nonexposure to the infection of plague for the ten days immediately preceding embarkation, may be admitted to entry without detention, provided in the opinion of the quarantine officer at the port of arrival he has not been exposed en route to persons and things presumably infected.

Par. 5. All passengers, except first-cabin passengers, shall be bathed and body clothing disinfected before landing. Similar measures shall be taken with the crew and their effects if the quarantine officer believes the crew has been exposed to infection.

Food and water supplies should not be taken on at an infected or suspected port or place, excepting in case of absolute necessity, and then only under medical supervision. A certification by a medical officer of the Public Health and Marine-Hospital Service that such supplies were from a noninfected locality will be required at the port of entry.

Following is a portion of section 10:

An Act To amend an act granting additional powers and imposing additional duties upon the Marine-Hospital Service, approved February 15, 1899.

Any master, owner, or agent of any vessel making a false statement relative to the sanitary condition of said vessel or its contents, or as to the health of any person or passenger thereon, shall be deemed guilty of a misdemeanor and subject to arrest, and upon conviction thereof be punished by a fine of not more than five hundred dollars or imprisonment, for not more than one year, or both, in the discretion of the court.

Strict compliance with these regulations will be insisted upon with all vessels coming from infected or suspected ports, until thirty days shall have elapsed since date of last case of suspicious illness at aforesaid port or place.

W. W. McKAY,
Acting Assistant Surgeon, P. H. and M. H. S.,
United States Quarantine Officer.

Statistical reports of States and cities of the United States—Yearly and monthly.

CALIFORNIA—Sacramento.—Month of December, 1902. Estimated population, 30,000. Total number of deaths, 48, including diphtheria, 1; enteric fever, 1, and 8 from phthisis pulmonalis.

IOWA—Davenport.—Month of December, 1902. Estimated population, 40,000. Total number of deaths, 42, including diphtheria, 1; enteric fever, 2, and 6 from phthisis pulmonalis.

The Health Bulletin says:

Diphtheria.—Linden, Grant, and Eden townships, Winnebago County; Thompson; Leeds; Keokuk; West Point; Griggs Township, Ida County; Manchester; Des Moines.

Measles.—Lake Township, Clay County.

Scarlet fever.—Des Moines; Grant Township, Monona County; Bloomfield; Gilmore City; Gladbrook; Ottumwa; Luana; and Shelby Township, Shelby County; Farmersburg Township, Clayton County.

Smallpox.—Ottumwa; Eden Township, Winnebago County, 1 case; Fredonia; Columbus Junction; Boone, 1 case; Iowa and York townships, Iowa County, 1 and 7 cases, respectively; Stuart, 5 cases; Manchester, 1; Spirit Lake, 1; Massena, 2; Union, Massena, and Victoria townships, Cass County, 1, 1, and 2 cases, respectively; Grand View Township, Louisa County, 1; Union and Shelby townships, Shelby County, 3 and 2, respectively; Farmington Township, Van Buren County, 1; Argyle, 3; Montrose, Des Moines, Van Buren, and Charleston townships, Lee County, 1, 10, 4, and 50 cases, respectively; North Fork Township, Delaware County; Iowa City, 8; De Soto, 7; Van Meter Township, Dallas County, 7; Scott Township, Poweshiek County, 3; Logan, 5; Winterset, 9; West Bend, 2; Bevington, 3; Clearfield, 2; Webb, 1.

Typhoid fever.—Des Moines; Ottumwa.

Whooping cough.—None reported.

MICHIGAN.—Reports to the State board of health, Lansing, for the week ended January 17, 1903, from 79 observers, indicate that measles and diphtheria were more prevalent and phthisis pulmonalis, enteric fever, inflammation of bowels, whooping cough, erysipelas, and intermittent fever were less prevalent than in the preceding week. Meningitis was reported present at 3, whooping cough at 25, diphtheria at 40, enteric fever at 50, measles at 53, scarlet fever at 98, smallpox at 157, and phthisis pulmonalis at 160 places.

Reports to the State board of health, Lansing, for the week ended January 24, 1903, from 70 observers, indicate that tonsillitis, rheumatism, smallpox, phthisis pulmonalis, erysipelas, whooping cough, and intermittent fever were more prevalent, and diarrhea and diphtheria were less prevalent than in the preceding week. Meningitis was reported present at 3, whooping cough at 24, diphtheria at 37, measles at 49, enteric fever at 50, scarlet fever at 100, phthisis pulmonalis at 160, and smallpox at 179 places.

NEBRASKA—*Omaha*.—Month of November, 1902. Census population, 102,555. Total number of deaths, 79, including diphtheria, 5; enteric fever, 2; scarlet fever, 1, and 7 from phthisis pulmonalis.

Month of December, 1902. Total number of deaths, 74, including diphtheria, 2; enteric fever, 1; scarlet fever, 1, and 9 from phthisis pulmonalis.

Inspection of immigrants.

WEEKLY.

Place.	Week ended.	No. of ves-sels.	No. of immi-grants.
	1903.		
Baltimore, Md.....	Jan. 31	1	965
Boston, Mass.....	Jan. 24	5	163
New York, N. Y.....	do.....	13	7,383
Philadelphia, Pa.....	Jan. 31	2	178
Ponce, P. R.....	Jan. 17	1	3
San Juan, P. R.....	do.....	1	2
Subports.....	do.....	2	10